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realize the value of good nursing, a means for the betterment of themselves and of their children, it will only be necessary to offer it, and as soon as they know that such a means is available, the public will grasp it eagerly, with inestimably good and far-reaching results, and one of these results will be a much greater demand for nurses.

Massachusetts.

ELIZABETH ROSS, R.N.

OBSTETRICS IN PRIVATE NURSING

DEAR EDITOR: Obstetrics in private nursing differs from obstetrics in hospital nursing, only as the surroundings differ. The actual care of the mother and child are identical. The making of the engagement and keeping it are the first difficulties the young graduate will encounter. In the majority of cases, on account of expense, the patient will want to engage her nurse from the day estimated as the time for labor. This may cause some trouble as labor may come as much as two weeks ahead of the estimated time and if the nurse keeps her engagement, she may have to leave a case not taken subject to call. If possible, the engagement should be made for a week or two ahead. This need not cause much extra expense as the nurse can take short, clean cases subject to call. If this is not possible, the patient should understand that she runs some risk of having to get another nurse, as her's may be on a case she cannot leave so suddenly, and it would not be wise to change on account of the patient's condition. People who can afford it often wish the nurse to be in the house for some time before the confinement. This of course simplifies the matter of the engagement. I have heard of nurses who were engaged for obstetrical cases taking other cases and also charging the obstetrical patient for the time. This seems to me to be very unprofessional and does not speak very well for the honesty of the nurse. Nurses who do obstetrical work should be careful about the other cases they take. Contagious and infectious cases of any kind should be avoided for some time before an obstetrical case is due. If the nurse is not able to avoid a case of that kind, she should take an antiseptic bath, wash her hair, and disinfect herself thoroughly. Even then she runs the risk of causing infection.

It is well for the nurse engaged for an obstetrical case to visit her patient occasionally and become acquainted with her and her surroundings, and to make arrangements for the supplies and rooms to be used. Also the mother very often wishes some advice in making clothes for the baby. If possible, a large sunny room, convenient to the bath, and with a smaller room adjoining, to be used as nursery, should be chosen. The separate nursery is a great help in training the baby and is much better for the mother as, then, she will not be kept awake and worried by the baby crying. If the nurse is called some days before confinement, she can prepare the room properly. When this is the case, she should remove all extra furniture and bric-à-brac and see that the room is thoroughly cleaned. It is well for an obstetrical nurse to have a small sterilizer of her own. She can steam supplies in a wash boiler. There are many things one can sterilize if there is time, and there are some that it is almost impossible to do without. The nurse should have sterilized beforehand at least the following supplies: 1 sheet, 6 towels, 4 tablecovers, 1 pair leggins, 1 gown, cord for tying cord, and a small jar of applicators. Plenty of sterile gauze and cotton should be supplied,

also an abdominal binder, a breast binder, and a rubber sheet. When called after labor has begun, the first thing to do is to put plenty of water on to boil. Then find basins to use for solutions; stew pans will do. Put two basins, a pitcher, cup for boric acid, a receptacle for the placenta, a pie pan will do nicely for this, and fountain syringe in a wash boiler to boil. In emergency this water can be used for sterile water. While these are boiling the room and patient can be prepared. The dresser will serve for the sterile sheets, towels, pads, etc., and a sewing, card, or centre table can be used for the basins of solutions, sponges, instruments, and pitcher of warm sterile water. Vessels of hot and cold sterile water can be put on a chair or even on the floor. A small table for ergot, a glass of water, chloroform, and mask should be provided and a pail or slop jar for soiled sponges. Great care should be exercised throughout these preparations, and throughout the case, not to mar or in any way injure the furniture. Though it may not be costly, or even nice, it is the patient's best and should be handled carefully. Newspapers under sterile covers will help to protect the tables from spilled solutions and can also be used to protect a carpet, though heavy paper or some old clean carpet is better. After the room is thus prepared, the nurse can devote all of her time to her patient, preparing her in the usual hospital manner, and in making the bed and preparing a second bed with warm blanket and hot-water bottle for the baby.

The chart should never be neglected, an accurate record being kept during labor and after as long as the case lasts. This often seems a waste of time when the doctor does not even visit the case; but if anything should happen he would be very glad to have a complete history. The diet should be watched carefully. I find it harder to regulate the diet in a home than in the hospital. The patient often knows what is being prepared and sometimes helps to order for the house and naturally wants the same as the others have and it is often hard to refuse. But for the first week the diet should be limited.

The obstetrical nurse is in a position to do something to help lower the rate of infant mortality by the example she sets in caring for the baby. It should be put to breast every two hours during the day and not more often than every four hours at night. These hours should be the same each day. The bath should be given each morning at the same hour. It should be kept in a bed of its own and it is better to keep it in a separate room. Regularity should be strict.

Many nurses, perhaps the majority, do not care for obstetrical work. The reasons given are generally that it is so uncertain and one loses time in waiting or is inconvenienced by being obliged to leave a case for one previously engaged, or that some of the doctors do not like to employ a nurse who does obstetrical work as they are uncertain. This may all be true, but, on the other hand, there is some advantage to be gained also, and if a nurse wishes to do this work she will soon learn how to make her engagements so as to avoid most difficulties.

Obstetrical nursing takes one into the better class of homes and if a nurse becomes popular she will gain other kinds of cases in these same homes. Also, it is a change from the usual worried anxious atmosphere of the home in which there is severe illness. To go to a home made happy by the arrival of a baby, it seems to me should be a relief to any nurse.

At first I thought there was no science, no skill, to an obstetrical case—nothing but a ceaseless round of drudgery. As I have done more, I can see

how badly mistaken I was. Aseptic conditions and how to maintain them, caring for the babe, watching its development which becomes more and more interesting, keep one interested. As one has almost three cases in one—medical, surgical, and care of the baby—it is harder than most cases and in most states the nurses receive more for this work.

Kansas.

G. L.

AROUND-THE-WORLD LETTERS

(Extracts from letter dated Japan, January 7)

DEAR EDITOR: The next day we moved on toward Kobe. This part of the trip is through the Inland Sea, and nothing lovelier can be imagined than steaming along slowly between the many islands covered with terraced rice fields, and with jutting rocks crowned with little gnarled trees, standing like lacework against the sky. When the sun suddenly glistened on a snow-capped peak in the background, we just caught our breath with sheer joy at the beauty of it all.

Kobe was not quite so cold, and here I learned the meaning of some of the decorations that had been conspicuous in Nagasaki as well as in Kobe. Every building is fringed with long tassels of rice straw. Just as the palm forms the chief emblem of joy or sorrow in Egypt and India, so rice, the chief article of food, expresses the emotions in Japan. Each doorway, from the highest to the lowest, according to purse and taste, had a decoration of bamboo, pine, rice, and oranges, expressive of fidelity, longevity, and plenty. Some of the carts had a little tied to a spoke of the wheel. The boats have it tied to the mast. Included in these New Year's decorations were many fluttering bits of white tissue-paper. These had all been blessed by the priest and wherever exhibited meant that the house and its inhabitants were blessed, that no evil could flourish there.

The shrines and temples are very interesting. There are no stated times for attending worship and there are no buildings with paid-for seats, like our churches. The Buddhist worships in the open air at all hours of the day. He drops his contribution in a large wooden trough before the shrine. Sometimes his offerings are works of art. In that case, they are tenderly preserved, sometimes under dust, within enclosures. Offerings of the choicest saki, a kind of rice whiskey, are stored in the shrine and dutifully drunk by the priests. A bronze statue of Buddha, forty-eight feet high, has one of the only two statues in Japan of the mother of Buddha in the shrine at the base. Here, also, is the baby Buddha, a cheerful little bronze in the Banzai position, kept shining by the many little hands which touch the part which on their own bodies is diseased. The naïve sentiment of the people made them place their best Port Arthur trophy, a huge cannon, next to their very best shrine. Here the children play and sing, climbing alike on gods and guns.

After seeing the town we went through the theatre street, gay with banners and fluttering flags. An advertisement thrust into our hands announced that the programme is changed "thrith a month." Also there is a comic picture of "The Wond-be Dog Trainer." The word barber is written bar ber. This part of the town had a sort of Coney Island atmosphere, so we stepped out of our rickshaws and viewed it on foot. Instead of hot sausages, there was the toothsome octopus boiling in a pot and dispensed to the luxurious on wooden sticks.